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## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| NAME OF COMMITTEE IN FULL     Enyart for Congress            |                                       |                        | ]   |                     |
|--|---------------------------------------|------------------------|---|---------------------|
| ADDRESS (number and street) PO Box 308                       |                                       |                        | -   |                     |
| FO BOX 300   |                                       |                        |   |                     |
| CITY, STATE, and ZIP CODE                                    |                                       |                        | -   |                     |
| Belleville   | IL 622                                |                        |   |                     |
| 2. NAME OF CANDIDATE   | 3. OFFICE SOUGHT (State and District) |                        | 4. FEC IDENTIFICATION NUMBER  |                     |
| William L. Enyart Jr.  | House                                 | IL 12                  | C00523258   |                     |
| 5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING             | YES, IT AMENDS THE NOTICE FILED ON    |                        | /   | <i>I</i>            |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                   | Name of Employer                      |                        | Date (month,  | Amount              |
| Amy Fowler   | Sol Goldman Investments               |                        | day, year)  |                     |
|  |                                       |                        | 11/03/2012  | 1000.00             |
| 164 Mountain View Road                                       | Towns of the ID OAFTFOOAA             |                        |   |                     |
|  | Transaction ID : C4575861A Occupation |                        | -   |                     |
| Rhinebeck NY 12572   | Author                                |                        |   |                     |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                   | Name of Employer                      |                        | Date (month,  | Amount              |
| Mr. Paul Wellhausen  | SCF                                   |                        | day, year)  |                     |
|  |                                       |                        | 11/03/2012  | 1000.00             |
| 2801 Rock Rd   |                                       |                        |   |                     |
|  | Transaction ID : C4572235A            |                        |   |                     |
| Pontoon Beach IL 62040-6863                                  | Occupation  Manager                   |                        |   |                     |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                   | Name of Employer                      |                        | Date (month,  | Amount              |
| O. I DEL MANIE, MAILING ADDITEGO AND ZII GODE                | Name of Employer                      |                        | day, year)  | Amount              |
|  |                                       |                        |   |                     |
|  |                                       |                        |   |                     |
|  |                                       |                        |   |                     |
|  | Occupation                            | Occupation             |   |                     |
|  | Nome of Employer                      |                        | Date (month,  | Amount              |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE  Name of Employer |                                       |                        | day, year)  | Amount              |
|  |                                       |                        |   |                     |
|  |                                       |                        |   |                     |
|  |                                       |                        |   |                     |
|  | Occupation                            |                        | 7   |                     |
|  |                                       |                        |   |                     |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                   | Name of Employer                      |                        | Date (month, day, year)   | Amount              |
|  |                                       |                        |   |                     |
|  |                                       |                        |   |                     |
|  |                                       |                        |   |                     |
|  | Occupation                            |                        | -   |                     |
|  |                                       |                        |   |                     |
| SIGNATURE (optional) Jason A. Bresler                        | <del> </del>                          | <b>DATE</b> 11/04/2012 |   | nformation contact: |
| Juson A. Diesiei   | [Electronically Filed]                |                        | Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |                     |
|  |                                       |                        |   |                     |

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